

## **CITY OF GREEN BAY APPLICATION FOR SPECIAL EVENT PERMIT**

Answer all questions completely. Please print clearly.

This application must be on file in the Risk Management Division at least **60 days prior** to the event.

City of Green Bay, 100 North Jefferson St. Room 500, Green Bay, WI 54301

1.)	Request is for: Parade	☐ Run/W	alk	k Exhibition		Other:		
2.)	Name of Event:		Date of Event:			Rain Date: _		
3.)	.) Name of Sponsoring Organization:							
	Address:		City:		State:		Zip Code:	
4.)	Contact Person:		Phone:		Fax:		E-mail:	
			City:		State:		Zip Code:	
5.)	Assembly Time:			e:		End Time:		
6.)	Specific location of event:  Attach a map designating the event parame			runs/walks	s/parades.			
,	Are street closures required? Is so, list streets to be closed.							
8.)	Estimated number of Participants:	s: Vehicles:			Animals:			
	Food prepared/served at event?		☐ No					nt (448-6400)
	Will alcoholic beverages be served?	_	$\square$ No					
	Will tents or other temporary structures be e		☐ Yes	□ No				
	Will the event utilize any Green Bay Park Fa		☐ Yes	□ No	If so, which	:h:		
13.)	eck which services are needed: Cleanup		☐ Barrica	iding	☐ Garba	ge Pick-up	☐ Street	Sweeping
	If yes, please explain:							
14.)	.) Will any fireworks or other pyrotechnic devices be used during the event?							
	If yes, please explain:							
15.)	Is any other special assistance from the City	☐ Yes	□No	If yes, please explain:				
	HOLD HARMLESS INDEMNIFICATION AND DEFENSE THE APPLICANT AND/OR THE ORGANIZATION AGREES TO INDEMNIFY, DEFEND AND HOLD HARMESS THE CITY OF GREEN BAY AND ITS OFFICERS, OFFICIALS, EMPLOYEES AND AGENTS FROM AND AGAINST ANY AND ALL LIABILITY, LOSS, DAMAGE, EXPENSES, COSTS, INCLUDING ATTORNEY FEES ARISING OUT OF THE ACTIVITIES PERFORMED AS DESCRIBED HEREIN, CAUSED IN WHOLE OR IN PART BY ANY NEGLIGENT ACT OR OMISSION OF THE APPLICANT/ORGANIZATION, ANYONE DIRECTLY OR INDIRECTLY EMPLOYED BY ANY OF THEM OR ANYONE WHOSE ACTS ON BEHALF OF THEM MAY BE LIABLE, EXCEPT WHERE CAUSED BY THE SOLE NEGLIGENCE OR WILLFUL MISCONDUCT OF THE CITY.							
		Signature of Applicant						Date
		FOI	R CITY U	SE ONLY	1			
	Date application received:							
	Certificate of Insurance on file with required	☐ Yes ☐ No						
	Liquor License required: Yes							
	City Departments to be Notified: GBPD			Mayor				
	Event Classification: $\square$ Low Hazard	□Medium		□High Ha		Special Hazard		
	Permit Fee: \$25.00	□ \$50             □             □	0.00	□ \$25	0.00	□ \$500	.00	
	Comments:							
	Application: Approved	Denied	i					
	Safety Manager Date Appro							
		Date Approved						